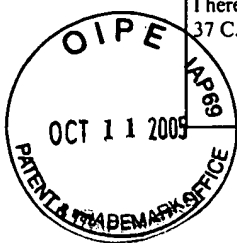


IFW  
\$

**Holly Franco**

Date \_\_\_\_\_



*In re* Application of:

Philip J. Scarpance, et al.

Serial No. 10/822,613

Filed: April 12, 2004

**For: rAAV VECTOR-BASED PRO-  
OPIOMELANOCORTIN COMPOSITIONS  
AND METHODS OF USE**

[illegible]

**Confirmation No.: 5010**

**Examiner: Salvoza, M. Franco**

Group Art Unit: 1648

Atty. Docket No.: 36689.26  
(formerly 4300.015400)

**Mail Stop Amendment  
Commissioner For Patents  
P.O. Box 1450  
Alexandria, VA 22313-1450**

Dear Sir:

In compliance with the duty of disclosure under 37 CFR §1.56, and in accordance with the practice under 37 CFR §1.97 and §1.98, the Examiner's attention is directed to the documents listed on the enclosed modified Form PTO-1449. No inference should be made that the cited references are in fact material, are in fact prior art, or that no better art exists. The cited patents are listed in numerical order and are not in any order based on their pertinence.

Pursuant to the amendment to 37 CFR 1.98 (a)(2)(i), as stated in an OG Notice dated October 12, 2004, copies of the U.S. patent documents listed on the enclosed modified Form PTO-1449 are not attached.


This Information Disclosure Statement is being filed more than three months after the United States filing date and after the mailing date of the first Office Action on the merits, but before the mailing date of a Final Action under §1.113 or Notice of Allowance under §1.311 (37 CFR §1.97(c)).

Accompanying this transmittal is the \$180.00 fee set forth in 37 CFR §1.17(p) for submission of an Information Disclosure Statement under §1.97(c).

The Commissioner is hereby authorized to charge any additional fees which may be required or credit any overpayment to Deposit Account 08-1394.

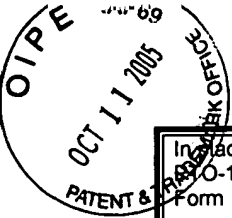
It is respectfully requested that the above information be considered by the Examiner and that a copy of the enclosed Form PTO-1449 be returned indicating that such information has been considered.

Respectfully submitted,



Mark D. Moore, Ph.D.  
Registration No. 42,903

Date: 10/07/05  
HAYNES AND BOONE, LLP  
901 Main Street, Suite 3100  
Dallas, Texas 75202-3789  
Telephone: 713-547-2040  
Facsimile: 214-200-0853



In place of PTO-1449 Form		U. S. DEPARTMENT OF COMMERCE PATENT AND TRADEMARK OFFICE		Complete if Known	
<b>INFORMATION DISCLOSURE STATEMENT BY APPLICANT</b> (use as many sheets as necessary)				Application Number	10/822,613
				Filing Date	04/12/2004
				Applicant(s)	Phillip Scarpace, et al.
				Art Unit	1645
				Examiner Name	Salvoza, M. Franco G.
SHEET	1	OF	1	Attorney Docket Number	36689.26

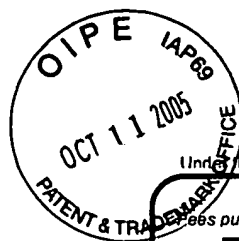
U. S. PATENT DOCUMENTS				
Examiner's Initials	Cite No.	Document Number	Publication Date MM-DD-YYYY	Name of Patentee or Applicant of Cited Document
		6,943,153	09-13-2005	Manning, Jr. et al.
		2003/0166284 A1	09-04-2003	Srivastava et al.
		2002/0194630 A1	12-19-2002	Manning, Jr. et al.
		2002/0132336 A1	09-19-2002	Dwarki et al.
		2001/0051611 A1	12-13-2001	Srivastava et al.
		2001/0034054 A1	10-25-2001	Dwarki et al.

FOREIGN PATENT DOCUMENTS					
Examiner's Initials	Cite No.	Foreign Patent Document (Country Code - Number - Kind)	Publication Date MM-DD-YYYY	Patentee or Applicant of Cited Document	Translation Y/N
		WO 02/24234 A2	03-28-2002	McGee, et al.	
		WO 00/54813 A2	09-21-2000	Manning, et al.	

NON-PATENT LITERATURE DOCUMENTS		
Examiner's Initials	Cite No.	Include name of the author (in CAPITAL LETTERS), title of the article, title of the item, date, page(s), volume- issue number(s), publisher, city/country where published

Examiner Signature		Date Considered	
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EXAMINER: Initial if reference considered, whether or not citation is in conformance with MPEP 609. Draw line through citation if not in conformance and not considered. Include a copy of this form with next communication to applicant.



PTO/SB/17 (12-04)

Approved for use through 07/31/2006. OMB 0651-0032

U.S. Patent and Trademark Office; U.S. DEPARTMENT OF COMMERCE

Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number.

Effective on 12/08/2004.

Fees pursuant to the Consolidated Appropriations Act, 2005 (H.R. 4818).

# FEE TRANSMITTAL

## For FY 2005

☒ Applicant claims small entity status. See 37 CFR 1.27

TOTAL AMOUNT OF PAYMENT (\$ ) 180

**Complete if Known**

Application Number	10/822,613
Filing Date	04/12/2004
First Named Inventor	Phillip Scarpace, et al.
Examiner Name	Salvoza, M. Franco G.
Art Unit	1645
Attorney Docket No.	36689.26

**METHOD OF PAYMENT (check all that apply)**☐ Check ☐ Credit Card ☐ Money Order ☐ None ☐ Other (please identify): \_\_\_\_\_☐ Deposit Account Deposit Account Number: 08-1394 Deposit Account Name: Haynes and Boone, LLP

For the above-identified deposit account, the Director is hereby authorized to: (check all that apply)

☐ Charge fee(s) indicated below ☐ Charge fee(s) indicated below, except for the filing fee  
☐ Charge any additional fee(s) or underpayments of fee(s) under 37 CFR 1.16 and 1.17 ☐ Credit any overpayments

WARNING: Information on this form may become public. Credit card information should not be included on this form. Provide credit card information and authorization on PTO-2038.

**FEE CALCULATION****1. BASIC FILING, SEARCH, AND EXAMINATION FEES**

Application Type	FILING FEES		SEARCH FEES		EXAMINATION FEES		Fees Paid (\$)
	Fee (\$)	Small Entity Fee (\$)	Fee (\$)	Small Entity Fee (\$)	Fee (\$)	Small Entity Fee (\$)	
Utility	300	150	500	250	200	100	
Design	200	100	100	50	130	65	
Plant	200	100	300	150	160	80	
Reissue	300	150	500	250	600	300	
Provisional	200	100	0	0	0	0	

**2. EXCESS CLAIM FEES**

Fee Description	Fee (\$)	Small Entity Fee (\$)
Each claim over 20 or, for Reissues, each claim over 20 and more than in the original patent	50	25
Each independent claim over 3 or, for Reissues, each independent claim more than in the original patent	200	100
Multiple dependent claims	360	180

<b>Total Claims</b>	<b>Extra Claims</b>	<b>Fee (\$)</b>	<b>Fee Paid (\$)</b>	<b>Multiple Dependent Claims</b>
- 20 or HP =	x	=		<b>Fee (\$)</b> <b>Fee Paid (\$)</b>

HP = highest number of total claims paid for, if greater than 20

<b>Indep. Claims</b>	<b>Extra Claims</b>	<b>Fee (\$)</b>	<b>Fee Paid (\$)</b>
- 3 or HP =	x	=	

HP = highest number of independent claims paid for, if greater than 3

**3. APPLICATION SIZE FEE**

If the specification and drawings exceed 100 sheets of paper, the application size fee due is \$250 (\$125 for small entity) for each additional 50 sheets or fraction thereof. See 35 U.S.C. 41(a)(1)(G) and 37 CFR 1.16(s).

<b>Total Sheets</b>	<b>Extra Sheets</b>	<b>Number of each additional 50 or fraction thereof</b>	<b>Fee (\$)</b>	<b>Fee Paid (\$)</b>
- 100 =	/ 50 =	(round up to a whole number) x	=	

**4. OTHER FEE(S)**

Non-English Specification, \$130 fee (no small entity discount)

Other: Information Disclosure Statement

Fees Paid (\$)

\$180

**SUBMITTED BY**

Signature		Registration No. (Attorney/Agent) 42,903	Telephone 713-547-2040
Name (Print/Type)	Mark D. Moore, Ph.D.	Date 10/07/2005	

This collection of information is required by 37 CFR 1.136. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 30 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

If you need assistance in completing the form, call 1-800-PTO-9199 and select option 2.